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CONFIRMATION NO. 9186

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|---|---|--------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/764,707  | <b>FILING OR 371(c) DATE</b><br>01/26/2004<br><b>RULE</b>   | <b>CLASS</b><br>361            | <b>GROUP ART UNIT</b><br>3679   | <b>ATTORNEY DOCKET NO.</b><br>124795-1004 |
| <b>APPLICANTS</b><br>Dave Williams, El Paso, TX;  |   |                                |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a CON of 09/648,405 08/24/2000 PAT 6,885,550 which claims benefit of 60/150,788 08/26/1999   |   |                                |   |   |
| <b>** FOREIGN APPLICATIONS *****</b><br>CHINA ZL99244527 09/07/1999   |   |                                |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br>** 04/30/2004   |   |                                |   |   |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <input checked="" type="checkbox"/> |   | <b>STATE OR COUNTRY</b><br>TX  | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>9                  |
| Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>  |   | <b>INDEPENDENT CLAIMS</b><br>3 |   |   |
| <b>ADDRESS</b><br>KENNETH T. EMANUELSON<br>GARDERE WYNNE SEWELL LLP<br>1601 ELM STREET, SUITE 3000<br>DALLAS, TX 75201  |   |                                |   |   |
| <b>TITLE</b><br>SCREWLESS CLIP MOUNTED COMPUTER DRIVE   |   |                                |   |   |
| <b>FILING FEE RECEIVED</b><br>970   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |